

# Declaration For U.S. Patent Application

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled  
 (Insert Title) Parenteral pharmaceutical compositions containing ammoniumalkyl salts of 2-arylpropionic acids.

the specification of which is attached hereto unless the following is checked:

was filed on December 23rd, 1996 as United States Application Number or PCT International Application Number PCT/IB96/01461 and was amended on \_\_\_\_\_  
 (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claim(s), as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 (a) - (d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

(List prior foreign applications.  
 See note A on back of this page)

	MI95A 002777	Italy	Priority Claimed
	(Number)	(Country)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	(Number)	(Country)	<input type="checkbox"/> Yes <input type="checkbox"/> No
	(Number)	(Country)	<input type="checkbox"/> Yes <input type="checkbox"/> No
	(Number)	(Country)	<input type="checkbox"/> Yes <input type="checkbox"/> No

(See note B on back of this page)

See attached list for additional prior foreign applications

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below.

(Application Number)	(Filing Date)
(Application Number)	(Filing Date)

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of the application:

(List Prior U.S. Applications)	(Application Serial Number)	(Filing Date)	(Status) (patented, pending, abandoned)
	(Application Serial Number)	(Filing Date)	(Status) (patented, pending, abandoned)

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

James E. Armstrong, III, Reg. No. 18,366; William F. Westerman, Reg. No. 29,988; Ken-Ichi Hattori, Reg. No. 32,861; Le-Nhung McLeland, Reg. No. 31,541; Ronald F. Naughton, Reg. No. 24,616; John R. Pegan, Reg. No. 18,069; William G. Kratz, Jr., Reg. No. 22,631; Albert Tockman, Reg. No. 19,722; Mel R. Quintos, Reg. No. 31,898; Donald W. Hanson, Reg. No. 27,133; Stephen G. Adrian, Reg. No. 32,878; William L. Brooks, Reg. No. 34,129; John F. Carney, Reg. No. 20,276; Edward F. Welsh, Reg. No. 22,455; Patrick D. Muir, Reg. No. 37,403; Gay A. Spahn, Reg. No. 34,978; and John P. Kong, Reg. No. 40,054 17

## SMALL ENTITY DECLARATION

APPLICANT OR PATENTEE

DOMPE' SpA

SERIAL NO.

( ) PATENT NO.

ATTORNEY'S  
DOCKET NO.(Check one  
of blocks 1.  FILED OR ISSUED  
1 or 2.)2.  SUBMITTED HEREWITHFOR Parenteral pharmaceutical compositions containing ammoniumalkyl salts of 2-arylpropionic acids  
(Insert Title)

I (we) hereby declare that I (we) am (are) entitled to the benefit of small entity status with respect to the above-identified application or patent for purposes of paying reduced fees under 35 USC 41(a) & (b) to the U.S. Patent and Trademark Office.

 A. INDEPENDENT INVENTOR

I (we) qualify as (an) independent inventor(s) as defined in 37 CFR 1.9(c).

 B. INDIVIDUAL NON-INVENTOR

I would qualify as an independent inventor as defined in 37 CFR 1.9(c) if I had made the invention.

 C. SMALL BUSINESS CONCERN

I am  THE OWNER  AN OFFICIAL of the small business concern identified below and am empowered to act on behalf of the concern. The concern qualifies under 37 CFR 1.9(d) and 13 CFR 121.3-18. Rights under contract or law have been conveyed to and remain with the concern and are exclusive unless a checkmark is placed here  . All other rights belong to small entities as defined in 37 CFR 1.9.

 D. NON-PROFIT ORGANIZATION

I am an official empowered to act on behalf of the non-profit organization identified below. The organization qualifies under 37 CFR 1.9(e), sub-section:  (1)  (2)  (3)  (4). Rights under contract or law have been conveyed to and remain with the organization and are exclusive unless a checkmark is placed here  . All other rights belong to small entities as defined in 37 CFR 1.9.

I (we) acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b)).

I (we) declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

A. INDEPENDENT INVENTOR(S)    B. INDIVIDUAL NON-INVENTOR(S)

Name	Signature	Date
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Name	Signature	Date
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Name	Signature	Date
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C. BUSINESS CONCERN    D. NON-PROFIT ORGANIZATION

DOMPE' SpA Name of Concern or Organization	Via Campo Di Pile - 67100 L'Aquila Italy Address
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By Sergio DOMPE'

Name of Person Signing

Signature

Managing Director

Title	Date
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11th July 1997

Please direct all communications to the following address:

ARMSTRONG, WESTERMAN, HATTORI,

MCLELAND & NAUGH

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Title 18 of the United States Code, § 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

1. Full name of sole or first inventor (given name, family name) Marco GENTILE

(See note  
C above)

Inventor's Signature Marco Gentile Date 11th July 1997

Residence L'Aquila Italy ITX Citizenship Italian

Post Office Address Via Campo Di Pile - 67100 L'Aquila - Italy

2. Full name of second inventor (given name, family name) Luigi BOLTRI

Inventor's Signature Luigi Boltri Date 11th July 1997

Residence L'Aquila Italy ITX Citizenship Italian

Post Office Address Via Campo Di Pile - 67100 L'Aquila - Italy

3. Full name of third inventor (given name, family name) Gaetano CLAVENNA

Inventor's Signature Gaetano Clavenna Date 11th July 1997

Residence Milano Italy ITX Citizenship Italian

Post Office Address Via San Martino, 12-12/a - 20122 Milano - Italy

4. Full name of fourth inventor (given name, family name) \_\_\_\_\_

Inventor's Signature \_\_\_\_\_ Date \_\_\_\_\_

Residence \_\_\_\_\_ Citizenship \_\_\_\_\_

Post Office Address \_\_\_\_\_

5. Full name of fifth inventor (given name, family name) \_\_\_\_\_

Inventor's Signature \_\_\_\_\_ Date \_\_\_\_\_

Residence \_\_\_\_\_ Citizenship \_\_\_\_\_

Post Office Address \_\_\_\_\_

6. Full name of sixth inventor (given name, family name) \_\_\_\_\_

Inventor's Signature \_\_\_\_\_ Date \_\_\_\_\_

Residence \_\_\_\_\_ Citizenship \_\_\_\_\_

Post Office Address \_\_\_\_\_

7. Full name of seventh inventor (given name, family name) \_\_\_\_\_

Inventor's Signature \_\_\_\_\_ Date \_\_\_\_\_

Residence \_\_\_\_\_ Citizenship \_\_\_\_\_

Post Office Address \_\_\_\_\_

8. Full name of eighth inventor (given name, family name) \_\_\_\_\_

Inventor's Signature \_\_\_\_\_ Date \_\_\_\_\_

Residence \_\_\_\_\_ Citizenship \_\_\_\_\_

Post Office Address \_\_\_\_\_